Section 1. Registration Information

Source Identification

Facility Name:

WEST FERTILIZER CO.

Parent Company #1 Name:

Parent Company #2 Name:

Submission and Acceptance

Submission Type:

Re-submission

Subsequent RMP Submission Reason:

5-year update (40 CFR 68.190(b)(1))

Description:

Receipt Date:

30-Jun-2011

Postmark Date:

30-Jun-2011

Next Due Date:

30-Jun-2016

Completeness Check Date:

30-Jun-2011

Complete RMP:

Yes

De-Registration / Closed Reason:

De-Registration / Closed Reason Other Text:

De-Registered / Closed Date:

De-Registered / Closed Effective Date:

Certification Received:

Yes

Facility Identification

EPA Facility Identifier:

1000 0013 5597

Other EPA Systems Facility ID:

Dun and Bradstreet Numbers (DUNS)

Facility DUNS:

Parent Company #1 DUNS: Parent Company #2 DUNS:

Facility Location Address

Street 1:

1471 JERRY MASHEK DRIVE

Street 2:

City:

WEST

State:

TEXAS

ZIP:

76691

ZIP4:

County:

MCLENNAN

Facility Latitude and Longitude

Latitude (decimal):

31.817778

Longitude (decimal):

-097.088611

Lat/Long Method:

GPS - Unspecified

Lat/Long Description:

Intake Pipe

Horizontal Accuracy Measure:

15

Horizontal Reference Datum Name:

World Geodetic System of 1984

Source Map Scale Number:

Plan Sequence Number: 1000022888

Owner or Operator

Operator Name: Operator Phone: GENERAL MANAGER

(254) 826-5309

Mailing Address

Operator Street 1:

P.O. BOX 399

Operator Street 2: Operator City:

WEST

Operator State:

TEXAS 76691

Operator ZIP: Operator ZIP4:

Operator Foreign State or Province:

Operator Foreign ZIP: Operator Foreign Country:

Name and title of person or position responsible for Part 68 (RMP) Implementation

RMP Name of Person:

GENERAL MANAGER

RMP Title of Person or Position:

GENERAL MANAGER

RMP E-mail Address:

Emergency Contact

Emergency Contact Name:

GENERAL MANAGER

Emergency Contact Title:

GENERAL MANAGER

Emergency Contact Phone:

(254) 826-5309

N/A

Emergency Contact 24-Hour Phone:

(254) 826-5979

Emergency Contact Ext. or PIN:

Emergency Contact E-mail Address:

Other Points of Contact

Facility or Parent Company E-mail Address:

Facility Public Contact Phone:

Facility or Parent Company WWW Homepage

Address:

Local Emergency Planning Committee

LEPC:

Mclennan County LEPC

Full Time Equivalent Employees

Number of Full Time Employees (FTE) on Site:

7

FTE Claimed as CBI:

Covered By

OSHA PSM:

EPCRA 302:

Yes

CAA Title V:

Air Operating Permit ID:

OSHA Ranking

OSHA Star or Merit Ranking:

Last Safety Inspection

Last Safety Inspection (By an External Agency)

22-Jun-2011

Last Safety Inspection Performed By an External

Craig Rogers, Security Truck Services, LLC

Agency:

Predictive Filing

Did this RMP involve predictive filing?:

Preparer Information

Preparer Name:

Preparer Phone:

Preparer Street 1:

Preparer Street 2:

Preparer City:

Preparer State:

Preparer ZIP:

Preparer ZIP4:

Preparer Foreign State:

Preparer Foreign Country:

Preparer Foreign ZIP:

Confidential Business Information (CBI)

CBI Claimed:

Substantiation Provided:

Unsanitized RMP Provided:

Reportable Accidents

Reportable Accidents:

See Section 6. Accident History below to determine if there were any accidents reported for this RMP.

Process Chemicals

Process ID:

1000027947

Description:

Process Chemical ID:

1000033407

Program Level:

Program Level 2 process

Chemical Name:

Ammonia (anhydrous)

CAS Number:

7664-41-7

Quantity (lbs):

54000

CBI Claimed:

Toxic

Flammable/Toxic:

Process NAICS

Process ID:

1000027947

Process NAICS ID:

1000028248

Program Level:

Program Level 2 process

NAICS Code:

42451

NAICS Description:

Grain and Field Bean Merchant Wholesalers

Section 2. Toxics: Worst Case

Section 3. Toxics: Alternative Release

Plan Sequence Number: 1000022888

Section 4. Flammables: Worst Case

No records found.

Plan Sequence Number: 1000022888

Section 5. Flammables: Alternative Release

No records found.

Section 6. Accident History

No records found.

Section 7. Program Level 3

Plan Sequence Number: 1000022888

Section 8. Program Level 2

Description:

The company has implemented a prevention program that includes Safety Information, Hazard Review, Operating Procedures, Training, Compliance Audits and Incident Investigation.

Program Level 2 Prevention Program Chemicals

Prevention Program Chemical ID:

1000019518

Chemical Name:

Ammonia (anhydrous)

Flammable/Toxic:

Toxic

CAS Number:

7664-41-7

Prevention Program Level 2 ID:

1000019212

NAICS Code:

42451

Safety Information

Safety Review Date (The date of the most recent review or revision of the safety infomation):

07-Jun-2011

Safety Compliance Regulations or Design Codes/Standards

NFPA 58 (or state law based on NFPA 58):

OSHA (29 CFR 1910.111):

Yes

ASTM Standards:

ANSI Standards:

Yes

ASME Standards:

None:

Other Regulation, Design Code, or Standard:

Comments:

Hazard Review

Hazard Review Date (The date of completion of most recent review or update):

07-Jun-2011

Change Completion Date (The expected or actual date of completion of all changes resulting from the

hazard review):

Major Hazards Identified

Toxic Release:

Yes

Fire:

Explosion:

Runaway Reaction: Polymerization:

Overpressurization:

Yes

Corrosion:

Yes

Overfilling:

Yes

Contamination:

Equipment Failure:

Yes

Loss of Cooling, Heating, Electricity, Instrument Air:

EPA Fac	ility Identifier: 1000 0013 5597		Plan Sequence Number: 1000022888
	Earthquake:	Yes	
	Floods (Flood Plain):		
	Tornado:	Yes	
	Hurricanes:		
	Other Major Hazard Identified:		
Proce:	ss Controls in Use		
	Vents:		
	Relief Valves:		
	Check Valves:	Yes	
	Scrubbers:	. 55	
	Flares:		
	Manual Shutoffs:	Yes	
	Automatic Shutoffs:	(1,10.0)	
	Interlocks:		
	Alarms and Procedures:		
	Keyed Bypass:		
	Emergency Air Supply:		
	Emergency Power:		
	Backup Pump:		
	Grounding Equipment:		
	Inhibitor Addition:		
	Rupture Disks:		
	Excess Flow Device:	Yes	
	Quench System:	res	
	Purge System:		
	None:		
	Other Process Control in Use:		
Mitigat	tion Systems in Use		
	Sprinkler System:		
	Dikes:		
	Fire Walls:		
	Blast Walls:		
	Deluge System:		
	Water Curtain:		
	Enclosure:		
	Neutralization:		
	None:	Yes	
	Other Mitigation System in Use:		
Monito	oring/Detection Systems in Use		
	Process Area Detectors:		
	Perimeter Monitors:		
	None:	Yes	
	Other Monitoring/Detection System in Use:	103	
Chang	es Since Last PHA or PHA Update		
	Reduction in Chemical Inventory:		
	Increase in Chemical Inventory:		
	3		
	Change Process Parameters:		

Plan Sequence Number: 1000022888

Installation of Process Controls:

Installation of Process Detection Systems: Installation of Perimeter Monitoring Systems:

Installation of Mitigation Systems:

None Recommended:

None:

Yes

Other Changes Since Last PHA or PHA Update:

Review of Operating Procedures

Operating Procedures Revision Date (The date of the most recent review or revision of operating procedures): 07-Jun-2011

Training

Training Review Date (The date of the most recent review or revision of training programs):

07-Jun-2011

The Type of Training Provided

Classroom:

On the Job:

Yes

Other Training:

The Type of Competency Testing Used

Written Tests:

Oral Tests:

Demonstration:

Yes Yes

Observation:

Other Type of Competency Testing Used:

Maintenance

Maintenance Review Date (The date of the most recent review or revision of maintenance procedures):

07-Jun-2011

Equipment Inspection Date (The date of the most recent equipment inspection or test):

07-Jun-2011

Equipment Most Recently Inspected or Tested:

ALL

Compliance Audits

Compliance Audit Date (The date of the most recent 22-Jun-2011 compliance audit):

Audit Completion Date (The expected or actual date 22-Jun-2011 of completion of all changes resulting from the compliance audit):

Incident Investigation

Incident Investigation Date (The date of the most recent incident investigation (if any)):

Incident Investigation Changes Date (Expected or actual date of completion of all changes resulting from the investigation):

Plan Sequence Number: 1000022888

Most Recent Change Date: (The date of the most recent change that triggered a review or revision of safety information):

Confidential Business Information

CBI Claimed:

Section 9. Emergency Response

Written Emergency Response (ER) Plan

Community Plan (Is facility included in written community emergency response plan?):

Yes

Facility Plan (Does facility have its own written emergency response plan?):

Yes

Response Actions (Does ER plan include specific actions to be taken in response to accidental releases of regulated substance(s)?):

Yes

Public Information (Does ER plan include procedures for informing the public and local agencies responding to accidental release?):

Yes

Healthcare (Does facility's ER plan include information on emergency health care?):

Yes

Emergency Response Review

Review Date (Date of most recent review or update 07-Jun-2011 of facility's ER plan):

Emergency Response Training

Training Date (Date of most recent review or update 07-Jun-2011 of facility's employees):

Local Agency

Agency Name (Name of local agency with which the FIRE DEPT facility ER plan or response activities are coordinated):

Agency Phone Number (Phone number of local agency with which the facility ER plan or response activities are coordinated):

(000) 000-0911

Subject to

OSHA Regulations at 29 CFR 1910.38:

Yes

OSHA Regulations at 29 CFR 1910.120: Clean Water Regulations at 40 CFR 112:

RCRA Regulations at CFR 264, 265, and 279.52: OPA 90 Regulations at 40 CFR 112, 33 CFR 154, 49 CFR 194, or 30 CFR 254:

Yes

State EPCRA Rules or Laws: Other (Specify):

Plan Sequence Number: 1000022888

Executive Summary

EXECUTIVE SUMMARY

WEST FERTILIZER CO. WEST, TX.

For further information contact General Manager

Risk Management Plan - EXECUTIVE SUMMARY

1. The Facility Policy

The owners, management, and employees of the WEST FERTILIZER CO. are committed to the prevention of any accidental releases of anhydrous ammonia. If an accidental release should occur, the facility is prepared to work with the local fire company, or other authorities, to mitigate any release and minimize the impact of the release to people and the environment.

- 2. Facility Information
- A. The primary activity at the facility is the storage of fertilizers for sale to farmers.
- · Anhydrous ammonia is received, stored, and distributed for both direct
- 3. The worst-case release scenario and the alternative release scenario.
- a. The worst-case release scenario would be the release of the total contents of a storage tank released as a gas over 10 minutes.
- b. The alternative release scenario based on the most likely potential incident is a release from a break in a transfer hose.
- 4. The accidental release prevention program

The facility has implemented the provisions of "Safety Requirements for the Storage and Handling of Anhydrous Ammonia, Kk-611.1", published by The American National Standards Institute, Inc., and the standards of the U.S. Occupational Safety and Health Administration (OSHA), 29 CFR 1910.111, "Storage and handling of Anhydrous Ammonia".

- 5. The Five-year Accident History
- a. There have been no accidental releases of anhydrous ammonia in the past five years that:
- Å· Have caused any deaths, injuries, or significant property damage at the facility; nor
- · To our knowledge, have resulted in offsite deaths, injuries, evacuations, sheltering in place, property damage, or environmental damage.
- 6. The Emergency Response Program

The facility has:

- a. A written Emergency Action Plan, in accordance with OSHA standard, 29 CFR 1910.38;
- b. Provided state and local authorities the emergency planning and community right-to-know information as required under SARA Title III (EPCRA).
- c. A written emergency response program, in accordance with OSHA standard 29 CFR 1910.120, including pre-emergency

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planning and employee training.

7. Planned Changed to Improve Safety

Safety improvement is an on-going process at the facility. Periodic evaluations are performed to assess the maintenance of safe conditions. There are no additional specific anhydrous ammonia safety recommendations for implementation at this time.